

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2002 8:00 am
Secretary of State

09-10-2002 90236 047 ***150.00

DOCUMENT # P97000011220

1. Entity Name
STAT MOBILE DIAGNOSTICS, INC.

Principal Place of Business

**3901 WEST SUNRISE BLVD.
 LAUDERHILL FL 33311**

Mailing Address

**3901 WEST SUNRISE BLVD.
 LAUDERHILL FL 33311**

80137254



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4163 N 557
 Suite, Apt. #, etc.

3. Mailing Address

4163 N 557
 Suite, Apt. #, etc.

City & State

Lauderdale Lakes FL

City & State

Lauderdale Lakes FL

Zip
33319

Country
USA

Zip
33319

Country
USA

4. FEI Number **65-0734621**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WILKEN, TISDALE L
 3901 WEST SUNRISE BLVD.
 LAUDERHILL FL 33311**

7. Name and Address of New Registered Agent

Name **Wilken Tisdale**

Street Address (P.O. Box Number is Not Acceptable)

4163 N 557

City **Lauderdale Lakes FL** Zip Code **33319**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE **Wilken Tisdale President 9/1/02**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PTD** ☐ Delete
 NAME **TISDALE, WILKEN L**
 STREET ADDRESS **3901 WEST SUNRISE BLVD**
 CITY-ST-ZIP **LAUDERHILL FL 33311**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Wilken Tisdale 9/1/02**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attachment

Stat Mobile Diagnostics, Inc.
4163 NORTH STATE RD. 7
LAUDERDALE LAKES, FL. 33319
(954) 730-8004 FAX: (954) 730-8007

09/03/2002

TO WHOM IT MAY CONCERN:

I WILKEN L. TISDALE WOULD LIKE TO REQUEST AN EXEMPTION FROM THE LATE FILING FEE FOR MY ANNUAL REPORTS FOR THE FOLLOWING BUSINESSES. THE ORIGINAL UBR REPORTS WERE ALREADY MAILED OUT MONTHS AGO. WHEN THE FILING FEE WAS \$150.00

1) Stat Mobile Diagnostics, Inc. DOCUMENT NUMBER

P97000011220.

2) STAT REHABILITATION SERVICES, INC. DOCUMENT NUMBER

P99000083166

3) A&L MEDICAL EQUIPMENT, INC. DOCUMENT NUMBER

P04000109132.

THANK YOU,
WILKEN TISDALE

